

ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD
9535 E. DOUBLETREE RANCH ROAD, SUITE 100, SCOTTSDALE, AZ 85258
PHONE (602) 364-1PET (1738) FAX (602) 364-1039
VETBOARD.AZ.GOV

COMPLAINT INVESTIGATION FORM

If there is an issue with more than one veterinarian please file a separate Complaint Investigation Form for each veterinarian

PLEASE PRINT OR TYPE

FOR OFFICE USE ONLY

Date Received: Nov 1, 2017 Case Number: 18-29

A. THIS COMPLAINT IS FILED AGAINST THE FOLLOWING:

Name of Veterinarian/CVT: DR. STUART SHERRELL
Premise Name: ARROW ANIMAL HOSPITAL, PLC
Premise Address: 5144 W. Thunderbird
City: GLENDALE State: AZ Zip Code: 85306
Telephone: (602) 938-2707

B. INFORMATION REGARDING THE INDIVIDUAL FILING COMPLAINT*:

Name: PATRICK AND DIAN BREAZEALE
Address: [REDACTED]
City: [REDACTED] State: [REDACTED] Zip Code: [REDACTED]
Home Telephone: [REDACTED] Cell Telephone: [REDACTED]

*STATE LAW REQUIRES WE HAVE TO DISCLOSE YOUR NAME UNLESS WE CAN SHOW THAT DISCLOSURE WILL RESULT IN SUBSTANTIAL HARM TO YOU, SOMEONE ELSE OR THE PUBLIC PER A.R.S. § 41-1010. IF YOU HAVE REASON TO BELIEVE THAT SUBSTANTIAL HARM WILL RESULT IN DISCLOSURE OF YOUR NAME PLEASE PROVIDE COPIES OF RESTRAINING ORDERS OR OTHER DOCUMENTATION.

RECEIVED

NOV 01 2017

BY:

C. PATIENT INFORMATION (1):

Name: BANDERA
Breed/Species: JAPANESE Chin
Age: 10 Sex: FEMALE Color: Black and White

PATIENT INFORMATION (2):

Name: _____
Breed/Species: _____
Age: _____ Sex: _____ Color: _____

D. VETERINARIANS WHO HAVE PROVIDED CARE TO THIS PET FOR THIS ISSUE:

Please provide the name, address and phone number for each veterinarian.

DR. TRESSA MACKENNAN	Nichole Riley - Staff
VICTORIA HECKMAN - Staff	DR. Jim PRATER
Technicians	Willow Payton, DVM
DR. JESSICA JORDAN	All people worked for
Aubrey Foster - Staff	ARROW Animal Hospital
BRENDA ABRAHAM	(602) 938-2707

E. WITNESS INFORMATION:

Please provide the name, address and phone number of each witness that has direct knowledge regarding this case.

Staff that performed ANAL EXTRACTION on 10-13-17
At ARROW Animal Hospital [REDACTED] (2-Tech's)
Willow Payton, D.V.M. & office staff on that date
and Tech's

DIAN BREAZEALE - OWNER
[REDACTED]

Attestation of Person Requesting Investigation

By signing this form, I declare that the information contained herein is true and accurate to the best of my knowledge. Further, I authorize the release of any and all medical records or information necessary to complete the investigation of this case.

Signature: Dian Breazeale, Patrick Breazeale
Date: Oct. 31, 2017

F. ALLEGATIONS and/or CONCERNS:

Please provide all information that you feel is relevant to the complaint. This portion must be either typewritten or clearly printed in ink.

How does a dog PASS ON OVER AN ANAL EXTRACTION done in a Vets office by TRAINED EMPLOYEES? THIS SERVICE HAS BEEN PERFORMED THERE MANY TIMES IN HER LIFE. The day before she WAS A happy little girl playing CHASE AND HIDE AND SEEK with her brother. I thought it STRANGE the tech brought her back with a CHOKE LEASH ON when she still had her own LEASH AND COLLAR ON. I removed it and said "she doesn't NEED this AND ASKED if EVERYTHING WAS OK AND NORMAL?" The tech said YES AND WAS IN A HURRY to go back to the ROOM. I heard our BANDERA yelp twice when she WAS IN the private ROOM with techs.

When I got home and set her down she WAS walking funny, especially her front legs. Something's wrong! I rushed her back to the vet WAS told later by Willow Rayton, DVM, that if she lived she would NEVER be the same. The hospital did NOT HAVE OVERNIGHT CARE and we could take her to ANOTHER hospital that did. We brought her home and she PASSED with us that night, Oct. 13th.

The next morning we were told by Ms Rayton there WAS A video and that it would take THREE DAYS for us to have. I called the office Oct. 19th to get it and they said the vet had to sign A RELEASE, she WAS off work until Oct. 24th. Monday evening, Oct. 23rd we received the enclosed certified letter for inquires to be directed to their legal representative.

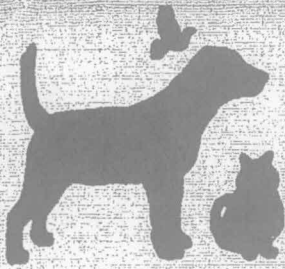
WE ARE HEARTBROKEN OVER THE LOSS OF OUR SPECIAL BANDERA. WE HAVE USED this Vets office for many years for all our dogs. For the health of our dogs we have followed their recommendations. They ARE family and so very loved. What happened?

BANDERA: JAPANESE CHIN

Born: 5-9-07

Died: 10-13-17

Your help is gratefully ours
Sincerely PATRICK AND DIAN
BREAZEAL



Arrow Animal Hospital, PLC

Dr. Jim Prater • Dr. Stuart Sherrell
Dr. Roger Willms • Dr. Leigh Ann Stastny

October 20, 2017

Dian and Patrick Breazeale

Dian and Patrick,

Upon the advice of legal counsel we are not in a position to provide a copy of the video footage to you as you have requested. All further inquiries should be directed to our legal representative.

David L. Stoll
Beaugureau, Hancock, Stoll and Schwartz, P.C.
302 East Coronado Rd
Phoenix, AZ 85004
dstoll@bhsslaw.com
602-977-7724

We want to express our deepest sympathies for your loss of Bandera.

Respectfully,

A handwritten signature in cursive script that reads "Tammy Sheedy".

Tammy Sheedy
Hospital Manager

CC: Willow Payton, D.V.M.
Joric McLean
David L. Stoll

Alma



November 22, 2017

Tracy Reindeau
Arizona State Veterinary Medical Examining Board
9535 East Doubletree Ranch Road, Suite 100
Scottsdale, Arizona 85258
Tracy.Riendeau@vetboard.az.gov

In Stuart Sherrell, D.V.M., Cause No. 18-29

To Whom It May Concern:

I was not the primary veterinarian in this case and incorporate by reference the detailed case summary submitted by the primary vet, Dr. Willow Payton. I suspect that I was named as the respondent because I am the premise license holder.

My involvement in the case was limited. I was first informed about the situation involving Bandera when I saw Dr. Payton doing radiographs on her. I was informed that Bandera had been in for an anal gland expression by the technicians earlier that day. She then was brought back in by the owners due to abnormal symptoms seen at home.

The owners were understandably upset having the acute onset of these signs after the gland expression and felt it was related the anal gland procedure. Dr. Payton had discussions with both owners that it was unrelated. We ran multiple tests and gave support care at no cost to the owner. Dr. Payton tried to explain that the stress of a vet visit can trigger other things to occur.

Mr. Breazeale was less understanding than his wife, especially after he and his wife declined our recommendations that Bandera be transferred to an emergency facility and passed away at home. As Mr. Breazeale became more and more belligerent and threatened to "go postal" on the hospital, we contacted our HR department and the police to file a report. Also, we directed all further contact with these owners to our attorney given the gravity of Mr. Breazeale's threats.

As for our leash policy, we use a blue slip lead on all dogs here so they don't escape their owner's collars and get away. Our practice is on a busy intersection, and we don't want dogs to get loose and run out where they could easily be hit by a car. Finally, with regard to our anal gland expression policy, we always take dogs to the treatment room for the procedure to keep the odor from the glands in back and not in the exam rooms. Thank you.

Stuart Sherrell DVM

DOUGLAS A. DUCEY
- GOVERNOR -



VICTORIA WHITMORE
- EXECUTIVE DIRECTOR -

ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD

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INVESTIGATIVE COMMITTEE REPORT

TO: Arizona State Veterinary Medical Examining Board

FROM: AM Investigative Committee: Robert Kritsberg, D.V.M. - Chair
Ryan Ainsworth, D.V.M.
Christina Tran, D.V.M.
Mary Williams
Ed Hunter, R.Ph - **ABSENT**

STAFF PRESENT: Tracy A. Riendeau, CVT – Investigations
Sunita Krishna – Assistant Attorney General
Victoria Whitmore, Executive Director

RE: Case: 18-29
Complainant(s): Patrick and Dian Breazeale
Respondent(s): Stuart Sherrell, D.V.M. (License: 1620)

SUMMARY:

Complaint Received at Board Office: 11/2/17
Committee Discussion: 2/6/17
Board IIR: 3/21/18

APPLICABLE STATUTES AND RULES:

Laws as Amended July 2014
(Salmon); Rules as Revised September
2013 (Yellow).

On October 13, 2017, "Bandera," a 10-year-old female Japanese Chin was presented to Respondent's premise for an anal gland expression. The procedure was performed and the dog was discharged.

Later that day, the dog was re-presented due to not being able to walk. Complainants were concerned that the dog's issues were related to the anal gland expression that occurred earlier that day.

Complainants contend Respondent's staff was negligent in the care of the dog.

Complainants were noticed and appeared.

Respondent was noticed and appeared with counsel, David Stoll.

The Committee reviewed medical records, testimony, and other documentation as described below:

- Complainant(s) narrative: *Patrick and Dian Breazeale*
- Respondent(s) narrative/medical record: *Stuart Sherrell, DVM*
- Consulting Veterinarian(s) narrative/medical record: *Willow Payton, DVM*

PROPOSED 'FINDINGS of FACT':

1. On October 13, 2017, the dog was presented to Respondent's premise for an anal gland expression. Technical staff took the dog into the treatment area to express the anal glands, per usual, to keep odors out of the exam rooms. The anal glands were expressed and the dog was brought back to the Complainants.
2. Complainants stated that when they arrived home the dog was having difficulty walking on the front limbs. The dog was presented to Arrow Animal Hospital for evaluation. The dog was examined by Dr. Payton who observed strabismus, anisocoria and intermittent horizontal nystagmus. She also noted that the dog's head drifted to the left and would stumble, and had intermittent disorientation. Dr. Payton's assessment of the dog was that she was unstable, in shock due to an unknown cause; heart; and neurological – stroke, seizure, tumor, pheochromocytoma or other neoplasia. The dog was placed on oxygen and an IV catheter was placed.
3. Dr. Payton met with Complainants to discuss her findings, relay current treatments and recommended diagnostics and stabilization treatment. Complainants gave verbal authorization to continue tests and treatments. Blood was collected, IV fluids were started and radiographs were taken. Ms. Breazeale stayed at the premise while Mr. Breazeale went home. No abnormalities were noted on radiographs and blood results revealed a mild decrease in red blood cells and elevated reticulocytes.
4. Dr. Payton updated Ms. Breazeale – her main concerns were stroke or tumor and recommended immediate transfer to a neurologist or critical care facility; referral was declined due to financial constraints. Dr. Payton explained that the dog had a grave prognosis if a response was not seen soon. Ms. Breazeale did agree to send out a larger blood panel but declined the recommendation for a referral a second time.
5. Dr. Payton stated in her narrative she explained to Ms. Breazeale that the dog's current condition was not caused by or related to the prior anal gland expression, as Complainants had believed. She advised that she had spoken with technical staff involved with the anal gland expression and was told it went normally; there was a video that confirmed their report.
6. Respondent examined the dog and recommended increasing her fluids and taking her off oxygen. The dog appeared brighter and her neuro signs were more recognizable as the shock signs were treated. Dexamethasone and buprenex were administered to the dog as the diagnosis was still unknown – Dr. Payton was trying to determine if the dog had an inflammatory or pain induced condition. The dog continued to worsen despite care.
7. Dr. Payton contacted Complainants with an update and recommended immediate transfer to a 24-hour facility with specialists. They agreed and were going to pick up the dog for transfer. During this time, the dog collapsed, was intubated, and received treatment with naloxone, propofol, IV fluid bolus and PPV. Radiographs were performed and no abnormalities were found.
8. Ms. Breazeale arrived to transfer the dog to VETMED. Dr. Payton gave her the current status of

the dog and the worsening condition. The dog would need to be stabilized before transferring on oxygen – which they could assist. Dr. Payton further discussed the high chance that the dog could pass away and differential diagnoses that included stroke and neoplasia.

9. Ms. Breazeale wanted to transfer the dog, but her husband wanted to bring the dog home. He was worried the dog would die without him and wanted her to die in his arms. Dr. Payton gave Complainants a map to VETMED and also gave information to Blue Pearl which was closer to their house. She attempted to get Ms. Breazeale to let the dog stay at the premise until they closed (at 8pm) but Mr. Breazeale wanted the dog home as soon as possible. The dog was discharged against medical advice. The dog had been treated that day at no charge.

10. The following day, Complainant returned to the premise to report that the dog had died the previous evening and blamed the anal gland expression for the dog's death. Dr. Payton gave her condolences and explained that stroke, cancer and chronic diseases can present acutely. She stated that she spoke with technical staff who confirmed that the anal gland expression was non-traumatic. Additionally, she reported that there was a monitoring video to show Complainants but she did not have access to the video over the weekend and needed to wait until the office manager returned the following week. Dr. Payton recommended a necropsy to help determine the cause of death.

11. Ms. Breazeale relayed that the dog's remains had been placed in the freezer and Dr. Payton responded that it could affect the necropsy results but it was still worth getting one performed to help with closure.

12. Dr. Payton wanted to show the monitoring video to Complainants, but due to Mr. Breazeale's continued threats, she was advised to not have them return to the premise. A police report was filed and directed any further communication through their attorney.

COMMITTEE DISCUSSION:

The Committee discussed that they reviewed the video of the dog's anal glands being expressed. It was clear that the dog was not in any distress, it was routine; she lifted her leg at one point but was a typical reaction to the procedure. Once on the ground, she moved normally – there was nothing in the video to indicate anything occurred to the dog while at the hospital.

The Committee discussed that the stress alone going into the premise and having her anal glands expressed could have precipitated the event that occurred. The dog could have had an underlying issue, a brain tumor or something else. However, it did not appear that anyone was responsible for what occurred to the dog. Respondent was not personally involved with the case – his is the responsible veterinarian for the premise.

A necropsy was performed therefore it is difficult to say what exactly occurred but the video showed that the dog was not injured during the anal gland expression.

COMMITTEE'S PROPOSED CONCLUSIONS of LAW:

The Committee concluded that no violations of the *Veterinary Practice Act* occurred.

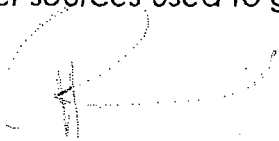
COMMITTEE'S RECOMMENDED DISPOSITION:

Motion: It was moved and seconded the Board:

Dismiss this issue with no violation.

Vote: The motion was approved with a vote of 4 to 0.

The information contained in this report was obtained from the case file, which includes the complaint, the respondent's response, any consulting veterinarian or witness input, and any other sources used to gather information for the investigation.



Tracy A. Riendeau, CVT
Investigative Division